DATE	1-9-1	Paper No.: _
		, <u>v</u>
TO SPE OF	: ART UNIT $26/6$	<u>2</u>
SUBJECT	: Request for Certificate of Co	rrection on Patent No.: <u>6969252</u>
A response is	s requested with respect to th	e accompanying request for a certificate of correction.
Please com	plete this form and return w	vith file, within 7 days to:
	·	orrection Branch – South Tower – 9A22
If response MADRAS.	is for an IFW, return to em	ployee (named below) via PUBSCofC Team in
With respect		correcting Office and/or Applicant's errors, should the
patent read a	s shown in the certificate of compensation per security per or meaning of the claims be compensation.	correction (COCIN)? No new matter should be introduced, no
	po or mouning or the dialine be t	<u>Valerie Jackson</u>
Thank You Fo	r Your Assistance	Certificates of Correction Branch
Note your decision	t for issuing the above-id on the appropriate box. Approved	Tel. No. 703-308-9390 ext. 114 entified correction(s) is hereby: All changes apply
Note your decision	on the appropriate box.	entified correction(s) is hereby:
Note your decision	Approved	entified correction(s) is hereby: All changes apply
Note your decision	Approved in Part	entified correction(s) is hereby: All changes apply. Specify below which changes do not apply.
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